

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 28, 1999 8:00 am
Secretary of State

07-28-1999 90016 005 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000061014**

1. Corporation Name
BIO-MECANICA, INC.



Principal Place of Business 44 W FLAGLER ST. SUITE 1700 MIAMI FL 33130	Mailing Address 44 W FLAGLER ST. SUITE 1700 MIAMI FL 33130
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/14/1997

4. FEI Number

59-3465892

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☐ No

2. Principal Place of Business
328 CRANDON BLD.

2a. Mailing Address
328 CRANDON BLD.

Suite, Apt. #, etc.
Suite 205 C

Suite, Apt. #, etc.

City & State
Key Biscayne, FL

City & State

Zip
33149

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VILLASANTE, ROBERTO	1.2 NAME	
STREET ADDRESS	44 W FLAGLER ST, SUITE 1700	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33130	1.4 CITY-ST-ZIP	
TITLE	PRESIDENT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLOS V. FREYRE	2.2 NAME	
STREET ADDRESS	4570 S.W. 71st ST.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33143	2.4 CITY-ST-ZIP	
TITLE	CHAIRMAN	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILLIP T. GEORGE, MD	3.2 NAME	
STREET ADDRESS	125 ARUDA PARKWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	DOVER, GA 33156	3.4 CITY-ST-ZIP	
TITLE	DIRECTOR	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROGER L. KHOURI, MD	4.2 NAME	
STREET ADDRESS	438 BOYLANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAYNE, FL 33149	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/25/99

Date

305-365-8880

Daytime Phone #

CR2E034 (5/99)